



Town Belmont  
**Historic District Commission**  
 Homer Municipal Building, 2nd Floor  
 19 Moore Street  
 Belmont, MA 02478

OFFICE USE
Case Number: HDC – 25-12

**APPLICATION**

In accordance with the Historic Districts Act, MGL Ch 40C, and the Town of Belmont General Bylaws, §40-315, the undersigned applies to the Belmont Historic District Commission for a Certificate of:

- Appropriateness                       Non-Applicability                       Hardship

**1. PRELIMINARY INFORMATION:**

Address of Property: 455 Concord Ave (Belmont Town Hall)

Property Owner's Name: Town of Belmont

Address: 455 Concord Ave

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Agent Name: David Blazon, Director of Belmont Facilities

Address: 455 Concord Ave, Belmont, MA 02478

Email: dblazon@belmont-ma.gov Phone: (617) 993-2646

I am the :     \_\_\_ Property Owner                      X Agent

\_\_\_ Property is Owned by a Corporation, LLC, or Trust (Submit authorization to sign as owner)

\_\_\_ Property is a Condominium or Cooperative Association (submit authorization to sign as trustee)

*If applicable:* Architect: Fuss & O'Neill / Bayside Engineering      Contractor: \_\_\_\_\_

**2. BRIEF DESCRIPTION OF PROPOSED WORK:**

Case No HDC-25-01: Belmont Town Hall retaining wall and railings. Reference COA approval dated 01/07/2025 where "Option 1 for the guardrail design was approved." This was for the curved railing along the drive only. In hindsight, the railing at the top landing was never reviewed. This application is primarily to review the design for the railing at the top landing. It is also to clarify post spacing and other details at the curved railing to confirm alignment with the original historic design elements.

**3. SIGNATURES:**

**As Owner, I make the following representations:**

- A. I hereby certify that I am the Owner of the Property at: \_\_\_\_\_
- B. I hereby certify that if an Agent is listed on this Application, this Agent has been authorized to represent this Application before the Belmont Historic District Commission.

**Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**As Applicant/Agent, I make the following representations:**

- 1. The information supplied on and in this Application is accurate to the best of my knowledge;
- 2. I will make no changes to the approved plans without prior approval from the Belmont Historic District Commission.

**Applicant/Agent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\* Incomplete applications and Insufficient documentation will not be accepted. \*

Approved March 23, 2017